Dear Editor,

Worldwide, the prevalence of obesity has increased dramatically during the last four decades, and if this trend continues, the majority of the world’s adult population will be either overweight or obese by 2030.1 Unfortunately, the number of Iranian population with obesity has risen more than fivefold in just three decades.2 Obesity is a major contributor to the global burden of chronic disease and disability, with serious social and psychological implications that affect virtually all ages and socioeconomic groups.3,4

Weight loss is the main outcome of obesity treatment. It induces an improvement of the clinical condition by preventing the appearance and progression of obesity-associated diseases and reducing the risk of developing disability and mortality. To induce weight loss, different strategies might be performed, starting from lifestyle modifications to bariatric surgery procedures depending on the obesity grading.3 With so many weight loss “diets” available, confusion abounds. Most patients are looking for the quickest and easiest way to lose weight and have unrealistic expectations. Obesity does not occur overnight, and its treatment requires lifetime adjustments to food (energy) intake and energy expenditure (increased activity). Energy consumed is either stored or burned. The cause of the obesity epidemic is that most people consume more energy than they burn, and the excess energy is stored as fat.4 The old adage remains true: to lose weight “calories in” must be less than “calories out”. In other words, for weight loss to occur there simply must be a daily caloric deficit. A modest decrease in caloric balance (500–1000 kcal/d) will result in a slow but progressive weight loss of 0.5–1.0 kg/wk. It is a simple premise, but it is extremely difficult to achieve in the long term. Weight loss is a major challenge for most patients who, in our fast-paced environment, do not eat properly and fail to establish patterns of regular physical activity. The key to success is that an individual with obesity should establish a healthy lifestyle that emphasizes and incorporates more healthy food choices and a daily exercise routine.7 It is recommended that initial physical activity should be moderate, gradually increasing the duration and frequency to 30–45 minutes of moderate aerobic activity 3–5 days per week.8 Developing an individualized weight loss program preferably with a dietitian familiar with weight management, along with regular follow-ups, will help promote success.

It is always important that patients check with their physician before starting an exercise program. According to data from the literature, common strategies to lose weight and keep it off include the following:

- Eating breakfast
- Eating a calorie-restricted low-fat diet that includes complex carbohydrates
- Getting plenty of exercise at moderate intensity, especially walking
- Self-monitoring through frequent weigh-ins and a food and exercise diary

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Competing Interests
The authors have no conflict of interests to declare.
Ethical Approval
Not applicable.

References